

Background

- Physical therapists are in a position to provide tobacco cessation counseling to their patients as being promoters of health and wellness, and the detrimental effects of nicotine on healing processes.
- Smoking decreases blood flow to injured tissues, delaying healing, and decreased strength of healed tissues.
- Physical therapists have low rates of tobacco cessation counseling.
- Motivational interviewing is a patient centered approach that focuses on the physical therapist facilitating the patient in resolving their own conflicts, and has been shown to be an effective strategy in tobacco cessation counseling.

Components of Motivational Interviewing

1. Express Empathy through reflective listening
2. Avoid arguing or direct confrontation
3. Develop discrepancies between patient's values and behaviors
4. Roll with resistance instead of opposing it
5. Support self efficacy

Objectives

- To expand the research regarding application of Tobacco Cessation Counseling by physical therapists.
- Utilize the principles of motivational interviewing within a tobacco counseling session.
- Enhance the application of tobacco cessation counseling by physical therapists through the methods and outcomes of this case report.

Intervention

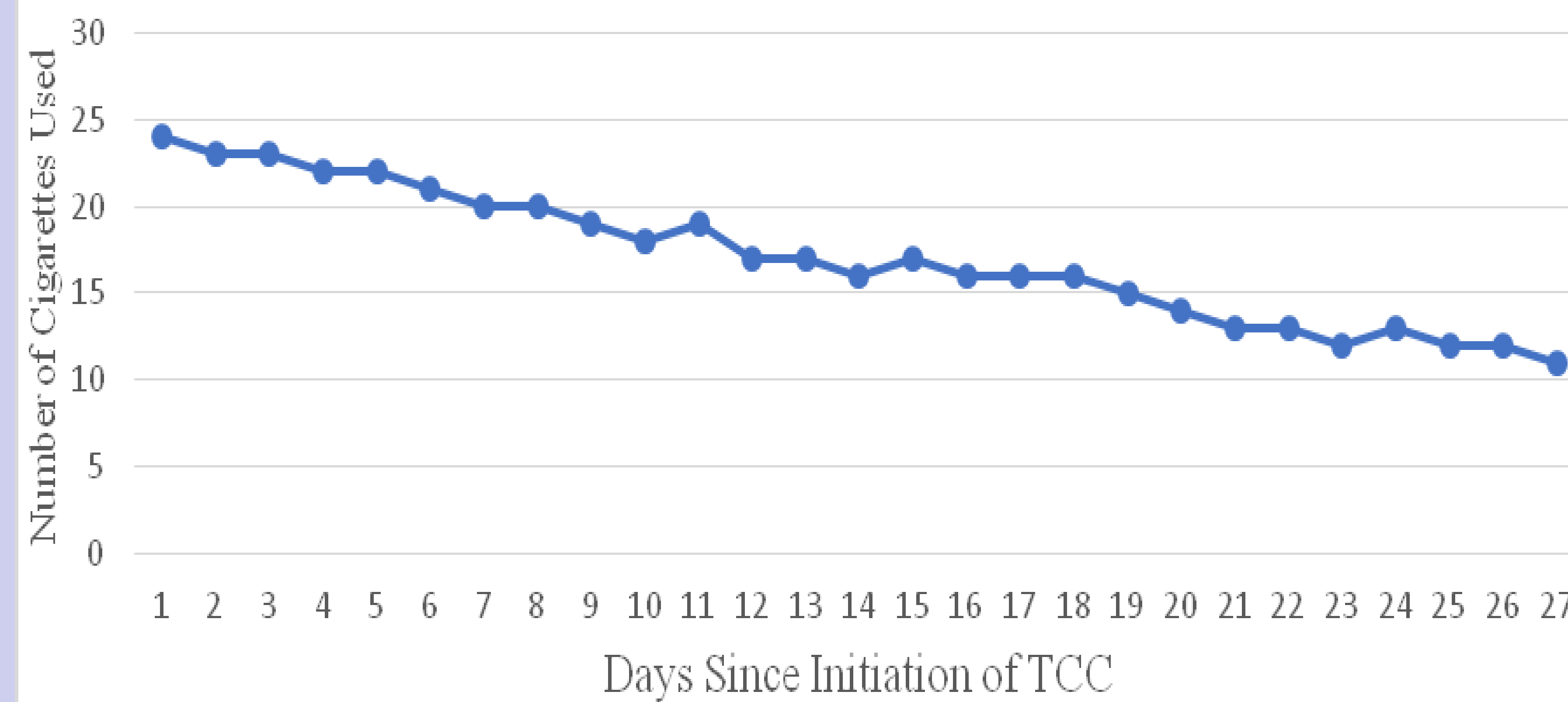
- A 58-year-old male patient attending physical therapy in an outpatient setting for polyneuropathy was recruited.
- The patient currently was smoking 25 cigarettes per day, with no other alcohol or drug use.
- The patient participated in 5 session of tobacco cessation counseling with an emphasis on motivational interviewing.
- The sessions were based on the outlines of a 6-session treatment plan created by Mississippi's A Comprehensive Treatment Center for Tobacco Treatment, Education, and Research.
- At each session, the patients self-efficacy, motivation, and Fagerstrom Test for Nicotine Dependence scores were taken.

Outcomes

Patient Cessation Progress

- As rated on a scale of zero to ten, the patient's self-rating of motivation to quit averaged 7.4 over the sessions, and his rating of self-efficacy of quitting averaged 5.6 over the sessions.
- The patient's Fagerstrom Test for Nicotine Dependence initially was 7, and decreased to 4 at his last session.
 - The decreases in his score were attributed to delaying his initial cigarette upon waking from 5 minutes to 1 hour, and decreasing his daily cigarette usage from 25 cigarettes per day to 12 per day.
- The patient also discussed tobacco cessation with his primary care physician between sessions one and two, who prescribed him Varenicline (Chantix), which he began taking.
- The patient did decrease his daily cigarette usage over the course of the five sessions, however is unclear if he continued to decrease his usage following the fifth session.
- The patient's final outcomes are not available due to the patient ceasing contact following the fifth session.

Daily Cigarette Use



Therapist Perceptions of TCC Counseling

- Although effective, this type of counseling is time consuming and would not be feasible in the context of a daily treatment session.
- The utilization of Motivational Interviewing takes the pressure off the therapist by encouraging the patient to find solutions that work best for them.

Discussion

- The patient's decrease in tobacco could be attributed to the therapist's counseling, the initiation of Varenicline, or internal motivation.
 - Varenicline independently increases the chance of a successful quit attempt by 200 to 300%.
- Brief counseling by a health professional has been found to encourage tobacco cessation in 14% of participants.
- Patients are more likely to quit if discussing tobacco cessation with two or more health professionals.
- The patient's drop out could be due embarrassment from relapse, continued success with no perceived need of counseling, or negative perceptions of the counseling and a desire to seek other services.
 - Drop out rates may be prevented by encouraging the patient to follow up regardless of progress, as patients who have relapsed have been found to be uncomfortable following up with their physician for fear of judgement.
- Utilizing motivational interviewing is reassuring as it decreases the need for the physical therapist to find solutions to the patient's problems.



Conclusions

- The patient's tobacco use decreased over the course of five TCC sessions with a physical therapist.
- It is unclear what factors contributed the most to the patient's decrease in tobacco, as the patient dropped out of the study for unknown reasons following session five.
- Future works should serve to isolate variables to determine efficacy, and strive to limit TCC to a time-constrained PT session.